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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)			Docket Number 660081 424C1
	In re Application of William V. Curran et al.		
AUG 2 8 2003	Application Number	09/904,756	Filed July 13, 2001
	For ANTIMICROBIAL SULFONIMIDE DERIVATIVES OF LIPOPEPTIDE ANTIBIOTICS		
Transitude of the state of the	Group Art Unit 1654	Examiner Jeffrey E. Russel	
This is a request under reply in the above iden		CFR 1.136(a) to extend the po	eriod for filing a
The requested extensi (check time period des		n-small-entity fee are as follo	ws
One month (37 CFR 1.17(a)(1))		\$	
Two months (37 CFR 1.17(a)(2))			\$
▼ Three months (37 CFR 1.17(a)(3))			\$ <u>930</u>
Four months (37 CFR 1.17(a)(4))			\$
Five months (37 CFR 1.17(a)(5))			\$
Payment by cre The Commission application to a The Commission to Deposit Acc	a Deposit Account. oner is hereby authoriz count Number <u>19-1090</u>	2038 is attached. I authorized to charge fees in zed to charge any fees which	may be required
or credit any o I am the ☐ applicant/inv		sit Account Number <u>19-1090</u> .	
assignee of record of the entire interest. See 37 CFR 3.71			
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).			
X attorney or agent of record.			
attorney or agent under 37 CFR 1.34(a).			
Registration number if acting under 37 CFR 1 34(a)			
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August 2	8. 2003		/
Date		Sig	gnature
		Jeffrey C	Pepe, Ph.D
NOTE Signatures of all the in Submit multiple forms if more	nventors or assignees of than one signature is rec	record of the entire interest or the	or printed name eir representative(s) are required

Burden Hour Statement. This form is estimated to face 0.1 hours to complete. The view yary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief information. Officer U.S. Patient and Trademark Office. Washington, DC 20231, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO Commissioner for Patients, P.O. Box 1450. Alexandria, VA 22313-1450.